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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/780,838
		Filing Date	2/18/2004
		First Named Inventor	Backes
		Group Art Unit	
		Examiner Name	Not yet known
Total Number of Pages in This Submission		Attorney Docket Number	160-040

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) and letter <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
		Remarks Please charge any deficiency or credit any overpayment to Deposit Account No. 502569.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mary Steubing, Reg. No. 37,946 Steubing McGuinness & Manaras LLP
Signature	
Date	4/26/05

## CERTIFICATE OF MAILING OR FACSIMILE

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Backes

Serial No.: 10/780,838

Filed: 2/18/2004

Title: Wireless Access Point Protocol Program

Attorney Docket No.: 160-040

Group Art Unit:

Examiner:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT**

Dear Sir:

This Information Disclosure Statement is submitted before mailing date of first office action on the merits.

Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

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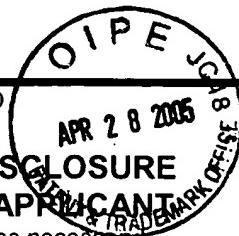
Signature: Christine M. Morissette

Respectfully submitted,

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**Substitute for form 1449A/PTO**

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**  
*(use as many sheets as necessary)*

Substitute for form 1449A/PTO				<i>Complete if Known</i>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>				Application Number	10/780,838
				Filing Date	2/18/2004
				First Named Inventor	Backes
				Art Unit	
				Examiner Name	Not yet known
Sheet	1	of	1	Attorney Docket Number	160-040

## **U.S. PATENT DOCUMENTS**

## FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	
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